FORM D

08048789

UNITED STATES
SECURITIES AND EXCHANGE COMMISSIONAIL Processing
Washington, D.C. 20549 Section

### FORM D

APR 18 2008

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION 110
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB AP	PROVAL
OMB Number:	
Expires: April 30	
Estimated avera	ge burden
hours per respor	nse 16.00

SEC	USE ONLY
Prefix	Serial
DATI	RECEIVED

Name of Offering ( check if this is an amendment and name has changed, and indica	ate change.)
Series C Preferred Stock; Common Stock issuable upon conversion thereof	_
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506	Section 4(6) ULOE PROCECCE
Type of Filing: New Filing  Amendment	- INOCESSED
A. BASIC IDENTIFICATION I	DATA ADD 9.5 acco
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate	change.)
MOG, Inc.	INDIVISON RELITERS
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
2607 Seventh Street, Unit D, Berkeley, CA 94710	(510) 883-7100
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices) Same	Same
Brief Description of Business	
Type of Business Organization	
	other (please specify):
business trust limited partnership, to be formed	
Month Year	
Actual or Estimated Date of Incorporation or Organization: 0 6 0 5	
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbre	eviation for State:
CN for Canada; FN for other foreign juri	sdiction) DE

## GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (2/99) 1 of 9

	A. BASIC IDE	NTIFICATION DATA		
2. Enter the information requested for the fo	ollowing:			
• Each promoter of the issuer, if the is	_	· ·		
<ul> <li>Each beneficial owner having the po of the issuer;</li> </ul>	ower to vote or dispose, o	or direct the vote or dispos	ition of, 10% or	more of a class of equity securities
<ul><li>Each executive officer and director</li><li>Each general and managing partner</li></ul>	<del>-</del>	of corporate general and n	nanaging partner	rs of partnership issuers; and
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or  Managing Partner
Full Name (Last name first, if individual)  Angels' Forum 74, LLC, The		_		
Business or Residence Address (Number at 2458 Embarcadero Way, Palo Alto, CA 94	·	Code)		
Check Box(es) that Apply:  Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Finnat Fiduciaria S,p.A.				
Business or Residence Address (Number an Piazza del Gesù, 49, 00186 Rome, Italy	nd Street, City, State, Zip	Code)		
Check Box(es) that Apply:  Promoter	⊠ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Simon – MOG Investment, LLC				
Business or Residence Address (Number at 225 W. Washington St., 2 <sup>nd</sup> Floor, Indiana	•	Code)		
Check Box(es) that Apply:  Promoter	⊠ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)  Hyman, David C.				
Business or Residence Address (Number at c/o MOG, Inc., 2607 Seventh Street, Unit	• • •			
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	☐ General and/or  Managing Partner
Full Name (Last name first, if individual)  Jones, Scott A.				
Business or Residence Address (Number at 1150 West 116th Street, Carmel, IN 46032	nd Street, City, State, Zip	Code)		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Simon, Stephen H.				
Business or Residence Address (Number ar c/o Simon – MOG Investment, LLC, 115 N		· ·	napolis, IN 46	204
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Universal Music Investments, Inc.			<del></del> /	
Business or Residence Address (Number ar	nd Street, City, State, Zip	Code)	<u> </u>	
2220 Colorado Avenue, Santa Monica,	•	•		

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			 Managing Partner
Full Name (Last name first, if Sony BMG Music Entertains			
Business or Residence Addres 550 Madison Avenue, Nev		Code)	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	•			B. 11	NFORMAT	TION ABO	UT OFFEI	RING			•.	
			Answ	er also in A	o non-accre	Column 2, if	filing unde	r ULOE.				No
2. What is	the minim	um investm	ent that will	be accepte	d from any	individual?	,			•••••	\$ <u>0.618</u>	<u>31</u>
3. Does th	e offering p	ermit joint	ownership (	of a single (	unit?	***************************************			**************		Yes ⊠	No
commis a persor states, I broker o	sion or sim to be liste ist the nam or dealer, yo	ilar remune d is an asso e of the bro ou may set t	ration for so ciated perso ker or deal forth the inf	olicitation on or agent er. If more	tho has bee of purchaser of a broker than five ( or that broke	s in connec or dealer r (5) persons	tion with sa egistered w to be listed	les of secur	ities in the and/or wit	offering. If h a state or	•	
Full Name	(Last name	first, if ind	ividual)									
Business of	r Residence	: Address (N	Number and	Street, Cit	y, State, Zip	Code)		·				
Name of A	ssociated B	roker or De	aler					<u> </u>		<u></u>		···-
States in W	hich Dareco	n Listed He	s Solicitad a	or Intende t	o Solicit Pu	rchacare				<del></del> -		<del> </del>
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Full Name	(Last name	first, if ind	ividual)									
Business o	r Residence	Address (N	Number and	Street, City	y, State, Zip	Code)						
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Full Name	(Last name	first, if ind	ividual)									
Business o	r Residence	Address (N	lumber and	Street, City	y, State, Zip	Code)	<u></u>			<del></del> -		
Name of A	ssociated B	roker or De	aler							·		
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

#### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [ ] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold \$0.00 \$2,840,338.28 ☐ Common ☐ Preferred \$0.00 Partnership Interests \$0.00 \$0.00 Other (Specify \$0.00 \$2,840,338.28 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases Accredited Investors \$2,840,338.28 6 Non-accredited Investors 0 \$0.00 Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Amount Type of offering Security Sold Rule 505 Rule 504 ..... Total ..... 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees.... \$0.00 Printing and Engraving Costs..... \$0.00 Legal Fees Ø \$50,000.00 Accounting Fees. \$0.00 Engineering Fees \$0.00 Sales Commissions (specify finders' fees separately) П \$0.00 Other Expenses (identify) Securities exemption filing fees. \$300.00

Total .....

\$50,300.00

 $\boxtimes$ 

	. C. OFFERING	PRICE, NUMBER OF INVESTORS, EXPENSES	AND USE OF PROCE	EDS
1	and total expenses furnished in response to	egate offering price given in response to Part C - Que Part C - Question 4.a. This difference is the "adjust	ted gross	<u>\$2,790,038.28</u>
1	the purposes shown. If the amount for any p	oss proceeds to the issuer used or proposed to be used fourpose is not known, furnish an estimate and check the bats listed must equal the adjusted gross proceeds to the inve.	oox to the	
			Payments to Officers, Directors, & Affiliates	
	Salaries and fees		🗆 <u>\$0.00</u>	\$0.00
	Purchase of real estate		🔲 <u>\$0.00</u>	<b>\$0.00</b>
	Purchase, rental or leasing and installa	tion of machinery and equipment	🔲 <u>\$0.00</u>	\$0.00
	Construction or leasing of plant building	gs and facilities	🗀 <u>\$0.00</u>	<b>\$0.00</b>
	offering that may be used in exchange			
	issuer pursuant to a merger)		··· 🛚 <u>\$0.00</u>	<b>\$0.00</b>
	Repayment of indebtedness		🔲 \$0.00	<b></b>
	Working capital		🗆 <u>\$0.00</u>	
	Other (specify):		<u>\$0.00</u>	□ <u>\$0.00</u>
	Column Totals		🗆 \$0.00	
	Total Payments Listed (column totals a	dded)	🛛 🖂 \$2,	790,038.28
		D. FEDERAL SIGNATURE		
sign	ature constitutes an undertaking by the iss	gned by the undersigned duly authorized person. If the uer to furnish to the U.S. Securities and Exchange Conservation investor pursuant to paragraph (b)(1) of But a paragraph (b) of But a paragraph	ommission, upon written	Rule 505, the following request of its staff, the
	er (Print or Type) OG, Inc.	Signatural Company	Date April (	2008
Van	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
Pat	rick A. Pohlen	Secretary		

**ATTENTION** 

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
i.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No ⊠
	See Appendix, Column 5, for state response.  The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notic (17 CFR 239.500) at such times as required by state law.  The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by offerees.		
2.	·	e on F	orm D
3.	· · · · · · · · · · · · · · · · · · ·	the is:	suer to
4.	Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availa		
		under	signed
	(Print or Type) Signature April 1, 2008		

Title (Print or Type)

Secretary

#### Instruction

Name (Print or Type)

Patrick A. Pohlen

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# APPENDIX

	Intend to n accre invest Sta	Type of security and aggregate offering price offered in state (ltem I)  Type of security and aggregate offering price offered in state (Part C-Item I)  Type of investor and amount purchased in State (Part C-Item 2)					5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
	.,		Series C Preferred	Number of Accredited		Number of Non- Accredited		N/	
State AL	Yes	No	Stock	Investors	Amount	Investors	Amount	Yes	No
AK							- "		
AZ					<u> </u>				
AR									
CA		Х	\$155,274.76	1	\$155,274.76	0	\$0.00		Х
СО									
СТ									
DE							****		
DC									
FL									
GA									
HI	·								
ID									
IL									
IN		Х	\$371,193.78	2	\$371,193.78	0	\$0.00		X
lA	 	ļ. <u></u>					<u>.</u>		<u> </u>
KS									
KY					· · · · ·			_	
LA									
ME					,				
MD									
MA		 						_	
MI								·	
MN									
MS									
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# APPENDIX

1		,	2	3 4 5							
l	Intend to n	on-	3  Type of security and aggregate offering	Type of investor and					Disqualification under State ULOE(if yes, attach explanation		
	St	ate ltem I)	price offered in state (Part C-Item 1)	offered in state amount purchased in State				of waiver granted) (Part E-Item 1)			
State	Yes	No	Series C Preferred Stock	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No		
MT	163	140	Stock	investors	Amount	IIIVESTOIS	Amount	163	110		
NE											
NV	ļ. <u></u>										
NH	ļ <u></u>				<u> </u>		<del>"</del> -				
NJ											
NM	<del>                                     </del>										
NY		Х	\$2,199,999.64	1	\$2,199,999.64	0	\$0.00		х		
NC											
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